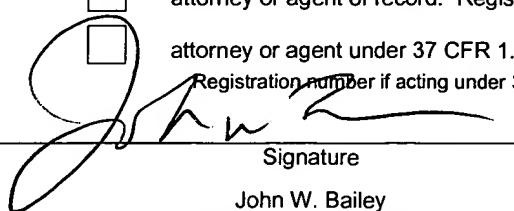


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  |                             | Docket Number (Optional)<br><br>0425-0836P |           |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
|---|-----------------------------|--|-----------|-----|------------------|--|---|-------|------|-----------|---|-------|-------|----|---|--------|-------|----|--|--------|-------|----|--|--------|--------|----|
| Application Number  | 09/842,896-Conf. #7584      | Filed<br><br>April 27, 2001                |           |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| For PLANT-ACTIVATING AGENT  |                             |  |           |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| Art Unit<br><br>1616  | Examiner<br><br>A. N. Pryor |  |           |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1"> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee</th> <th></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$120</td> <td>\$60</td> <td>\$ 120.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$450</td> <td>\$225</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1020</td> <td>\$510</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1590</td> <td>\$795</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2160</td> <td>\$1080</td> <td>\$</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u>. I have enclosed a duplicate copy of this sheet.</p> |                             |  |           | Fee | Small Entity Fee |  | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ 120.00 | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ |
|   | Fee                         | Small Entity Fee                           |           |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120                       | \$60                                       | \$ 120.00 |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$450                       | \$225                                      | \$        |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1020                      | \$510                                      | \$        |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1590                      | \$795                                      | \$        |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2160                      | \$1080                                     | \$        |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,881</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br/>Registration number if acting under 37 CFR 1.34 _____</p> <p><br/>Signature</p> <p>John W. Bailey<br/>Typed or printed name</p> <p>February 7, 2006<br/>Date</p> <p>(703) 205-8000<br/>Telephone Number</p>  |                             |  |           |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |
| <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p>   |                             |  |           |     |                  |  |   |       |      |           |   |       |       |    |   |        |       |    |  |        |       |    |  |        |        |    |

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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

**Effective on 12/08/2004.**  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**

|  |   |
|--|---|
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | TOTAL AMOUNT OF PAYMENT      (\$ ) 120.00 |
|--|---|

**Complete if Known**

|                      |                        |
|----------------------|------------------------|
| Application Number   | 09/842,896-Conf. #7584 |
| Filing Date          | April 27, 2001         |
| First Named Inventor | Masaharu HAYASHI       |
| Examiner Name        | A. N. Pryor            |
| Art Unit             | 1616                   |
| Attorney Docket No.  | 0425-0836P             |

**METHOD OF PAYMENT** (check all that apply)

Check     Credit Card     Money Order     None     Other (please identify): \_\_\_\_\_  
 Deposit Account    Deposit Account Number: 02-2448    Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below     Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17     Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |              | SEARCH FEES |              | EXAMINATION FEES |              | Fees Paid (\$) |
|------------------|-------------|--------------|-------------|--------------|------------------|--------------|----------------|
|                  | Fee (\$)    | Small Entity | Fee (\$)    | Small Entity | Fee (\$)         | Small Entity |                |
| Utility          | 300         | 150          | 500         | 250          | 200              | 100          |                |
| Design           | 200         | 100          | 100         | 50           | 130              | 65           |                |
| Plant            | 200         | 100          | 300         | 150          | 160              | 80           |                |
| Reissue          | 300         | 150          | 500         | 250          | 600              | 300          |                |
| Provisional      | 200         | 100          | 0           | 0            | 0                | 0            |                |

**2. EXCESS CLAIM FEES**

**Fee Description**

|  | Small Entity |
|--|--------------|
| Each claim over 20 (including Reissues)            | 50      25   |
| Each independent claim over 3 (including Reissues) | 200      100 |
| Multiple dependent claims                          | 360      180 |

|                     |                     |                 |                      |                                      |
|---------------------|---------------------|-----------------|----------------------|--------------------------------------|
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u>     |
| - 20 =              | x                   | =               |                      | <u>Fee (\$)</u> <u>Fee Paid (\$)</u> |

|                      |                     |                 |                      |                                      |
|----------------------|---------------------|-----------------|----------------------|--------------------------------------|
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Fee (\$)</u> <u>Fee Paid (\$)</u> |
| - 3 =                | x                   | =               |                      |                                      |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| - 100 =             | /50                 | (round up to a whole number) x                          | =               |                      |

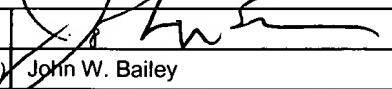
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

120.00

**SUBMITTED BY**

|                   |   |                                      |        |           |                  |
|-------------------|---|--------------------------------------|--------|-----------|------------------|
| Signature         |  | Registration No.<br>(Attorney/Agent) | 32,881 | Telephone | (703) 205-8000   |
| Name (Print/Type) | John W. Bailey  |                                      |        | Date      | February 7, 2006 |